

APPLICATION FOR RECORDS DISPOSITION STANDARD

INSTRUCTIONS: Prepare in duplicate and forward to the Records Management Analyst, Management Systems Division

3. Dept., Division, Subdivision & Administering Office Address Department of Transit Operations Transportation Division Security Department 125 Pine St. N. E.		FOR RECORDS MANAGEMENT DIVISION USE Date Received Application No. Date Completed JUL - 6 1977 77-191 JUL - 8 1977	
4. Person to Contact A. C. Brasill or J. L. Waters		5. Working Title Manager of Security	6. Telephone Number 586-5355
7. Action Requested a. <input checked="" type="checkbox"/> Establish Retention Schedule; record will continue to accumulate. b. <input type="checkbox"/> Dispose of present accumulation; no further accumulation anticipated. c. <input type="checkbox"/> Amend Application No. _____ Check One: <input type="checkbox"/> Change; <input type="checkbox"/> Supersede; <input type="checkbox"/> Void			
8. Dates of Series Earliest Latest 1972 present	9. Records Series Title (followed by title used in office, if different) Disturbances and Threats During Bus Operations Report File		
10. Division and Office Function What is the function of the Division and the Office in which this record series is created? see attached			
11. Record Series Description This file contains the following documents (include form numbers and titles, if any): Attach samples of the file. Documents relating to: <u>investigating</u> <u>reports of minor disturbances and threats made toward bus operators and passengers during bus operations</u> Included are: Report of Disturbances (Form 0407) containing full report of incident and disposition of case. File is arranged: monthly			
12. Monthly Reference Rate How often are records referred to which are: One to six months old <u>10</u> ; Seven to twelve months old <u>0</u> ; Thirteen to twenty-four months old <u>0</u> ; twenty-five months and older <u>0</u> ?			
13. Annual Rate of Accumulation of Records Letter-size drawers <u>1</u> ; Legal-size drawers _____ ; Shelves _____ ; Other (specify) _____			

YES	NO	14. Questionnaire (Place an "X" in the proper column)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	a. Is this the official copy of the series? If not, where is it?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	b. Does the series contain confidential information requiring security handling? If yes, cite law or regulation.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	c. Is this a vital record?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	d. Does this series have historical or long term research value?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	e. When one or two documents in the file make it necessary to keep the entire file for a long period, could these documents be scheduled separately?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	f. Is the information contained in this series ever published? If yes, attach copy.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	g. Is the information contained in this series ever analyzed and/or recorded in a summarized report? If yes, attach copy.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	h. Is there a duplication of this series in your office, or in another office or agency? If yes, where?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	i. Is this series (or a major portion of it) regularly microfilmed?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	j. Does the record series result in a computer printout?

15. Retention Requirements

The following requires the series to be kept:

- | | | | |
|--------------------------|--------------|-----------------------------------|--------------|
| a. State Law | _____ years. | d. Audit period | _____ years. |
| b. Statute of limitation | _____ years. | e. Administrative need | _____ years. |
| c. Federal law | _____ years. | f. Federal retention instructions | _____ years. |

Attach copy or excerpt of laws or regulations. Explain administrative need.

16. Approved Disposition Instructions

This agency recommends that the file series be cut off at the end of each:

☒ Calendar Year; ☐ Fiscal Year; ☐ Other _____ then,

- ☒ Hold in the current files area _____ month(s) _____ year(s); then
- ☒ Transfer to local holding area; hold 3 year(s); then
- ☐ Transfer to State Records Center; hold _____ year(s); then
- ☒ Destroy.
- ☐ Transfer to State Archives for permanent retention.
- ☐ Other (Specify)

These instructions apply to all prior and future accumulations of the series.

(Indicate briefly rationale for recommendations above/or write additional remarks):

17. APPROVALS

Approved	Department Records Management Officer	Date	Approved	Legal Counsel	Date
<i>John J. Walsh</i>		6-14-77	<i>Wayne K. Kunder</i>		6-22-77
Approved	Division Head/Designee	Date	Approved	Division of Audit	Date
<i>J. B. Swann</i>		6-14-77	<i>Robert L. Smith</i>		6-27-77
Approved	Department Head/Designee	Date	Approved	Department of Archives and History	Date
<i>John J. Walsh</i>		6-23-77	<i>Conall Hart</i>		7-7-77
Approved	Records Management Analyst	Date	Approved	MARTA Management Advisory Committee	Date
<i>D. Anglen</i>		6-23-77			